

**ZYMOSES AND  
PATHOGENESIS: A  
BACTERIOLOGICAL  
SKETCH, PART XI**

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Zymosis and Pathogenesis: A Bacteriological Sketch, Part XI by James I. Fellows

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**JAMES I. FELLOWS**

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BACTERIOLOGICAL  
SKETCH, PART XI**



ZYMOSIS  
AND  
PATHOGENESIS:

A BACTERIOLOGICAL SKETCH.

(2ND SECTION.)

[FOR THE MEDICAL PROFESSION.]

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PART XI.

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*To the Medical Gentlemen who have honoured me with the Reports and Testimonials which so greatly enhance the value of my publications, and to whom the works are respectfully dedicated, I tender the most cordial thanks, with the assurance that the contributions shall be used in such manner only as is consistent with the ethics of the Profession.*

**JAMES I. FELLOWS.**

**LONDON, 1892.**

4952

## CONTENTS.

	PAGE
TRAUMATIC INFECTIVE DISEASES .. .. .	9
PYRUMIC AND SEPTICÆMIC SYMPTOMS.. .. .	12
SEPTIC SYMPTOMS IN ZYMOTIC DISEASES .. .. .	12
ANALOGY TO THE PROCESS OF YEAST-FERMENTATION .. .. .	13
FEVERS .. .. .	15
SEPSIS .. .. .	16
SEPTICÆMIA .. .. .	19
LISTER'S WORK .. .. .	20
LIST OF DISEASES OF WHICH THE ORGANISMS HAVE BEEN DISCOVERED .. .. .	21
PUTREFACTION AND FERMENTATION .. .. .	23
PTOMAINES .. .. .	24
ALKALOIDS FOUND IN THE BODY IN SPECIFIC DISEASES .. .. .	26
ENZYMES .. .. .	27
IMMUNITY .. .. .	29
COATS ON THE CAUSES OF IMMUNITY .. .. .	29

	PAGE
PHAGOCYTES .. .. .	33
CHOLERA: KOCH'S RESEARCHES .. .. .	36
DR. ROBERT KOCH .. .. .	41
TUBERCLE: KOCH'S RESEARCHES .. .. .	43
ABSTRACT OF KOCH'S MORPHOLOGICAL CHRONICLES .. .. .	44
STEPS BY WHICH HIS DISCOVERY WAS MADE.. .. .	46
DIFFICULTIES IN THE WAY OF ITS THERAPEUTIC APPLICATION .. .. .	49
PROBABLE MODE OF ACTION OF THE REMEDY .. .. .	50
RESULTS.—VIRCHOW'S TIMELY WARNING .. .. .	53
TYPHOID FEVER.—EBERTH'S BACILLUS .. .. .	57
BRIEGER'S RESEARCHES .. .. .	60
DIPHTHERIA .. .. .	62
OTHER PATHOGENIC BACILLI.—CARCINOMA .. .. .	65
ANTISEPTICS AND DISINFECTANTS .. .. .	67
CONCLUSION .. .. .	77



## PREFACE.

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THE second part of the Bacteriological sketch is issued to the Medical Profession in accordance with Mr. Fellows' promise contained in the Preface to the first part.

In this section are included references to the labours of Koch and Lister. This has involved a notice of saprogenic and pathogenic microbes, of the causes of immunity in zymotic diseases, of the causes of traumatic infective affections, and of sepsis, septicæmia, and putrefactive changes. The more recent researches into the bacteriology of cholera, diphtheria, typhoid fever, tubercle, and carcinoma, have also been considered. And a table of the relative values of antiseptic and disinfectant agents has been included in this section.

Mr. Fellows would again venture to emphasise the fact that there is evidently a constitutional condition, which predisposes to the incubation of a zymotic affection in the system of the individual exposed to the particular *contagium vivum* to which he falls a victim. This elective affinity of the organism is manifested as a matter of everyday experience, in the complete immunity of one individual who is exposed to the same infection that proves fatal to his neighbour. The various theories which have been advanced to account for this "immunity" are fully referred to in this sketch.

That such an immunity exists, and that the reasons for it are most obscure, should at least prompt us to leave no protective measures neglected which may increase the resistive power of the system during epidemic waves. The ill effects of many infective diseases are not alone those attendant upon their acute stages, but also those felt in the more protracted sequelæ which follow—

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sequelæ all the more prolonged and serious in proportion to the debilitated state of the person who has recovered from the acute affection. Again, we perceive clearly in the case of tubercle of the lung how pre-eminently important it is to study such resistive conditions in the cases of those who, either by special predisposition, hereditary taint, or incidental depressing associations, have been brought into contact with the contagium of phthisis. It is no presumption, then, to urge on behalf of a preparation, the invigorating properties of which are widely recognised in the medical profession, as is also its power as an agent for promoting assimilation and metabolic change, that both in the prophylaxis and final cure of an infective affection, the Syrup of the Hypophosphites (Fellows) is a remedy of considerable value. *Its ready assimilation into the blood, its action in restoring tone to the nervous system, its assistance in the assimilation of food, the aid it affords in the manufacture of the blood-cells—all these things when taken into consideration with*